fluid without obstructing the view. The same is true in the repair of perforated gastric, duodenal, and typhoid ulcers, and ruptured hollow viscera, particularly a perforated ulcer or a traumatic rupture, if located in the sessile portion of the duodenum.

The field for the use of the aspirator is not limited to the nose and throat, and the abdomen. Any operative procedure where the wound is deep and the bleeding free, is benefited, as operations upon malignant growths in the region of the orbit or superior maxilla, tumors of the tongue, and substernal goitre. In the surgery of the long bones, where the fewer the sponges and instruments used the less the likelihood of infection, the aspirator may be used to a very great advantage.

The aspirator is not heralded as a substitute for sponges, but it has a definite place in surgery, and every operating-room should possess one.

## PRACTICAL X-RAY WORK FOR THE GENERAL PRACTITIONER.\*

By ALBERT SOILAND, M. D., Professor Roentgenology, College of Physicians and Surgeons, University Southern California.

As the number of men who are limiting their work to Roentgenology is so large, and with practically every hospital equipped with apparatus, there seems to-day to be little need for the general practitioner concerning himself with the trouble and expense of buying an outfit. For those, however, who are so situated as to be deprived of the services of a good Roentgen laboratory, and who are desirous of doing their own work, it is well to spend some time to learn the fundamentals and then ascertain just what to buy to suit their individual needs. There are other men, however, who live in communities where there are a number of excellent X-ray institutions and who could get such service both efficient and economical, yet spend a great deal of money for apparatus of their own just because Dr. So-and-So across the street has just installed the biggest X-ray machine west of New York. Here then we find a really expensive plant bought largely because the benevolent salesman assured the doctor that he would immediately become a master Roentgenologist and skin the fellow across the street a mile in taking X-ray pictures, and best of all, make a lot of easy money. The proud possessor of this modern plant now starts out to accomplish all that he expects to do, but soon realizes that all is not quite so simple as he contemplated. He sees that there is considerable to learn, that his pictures are not always like those in the catalogue, that the expense of running his outfit is not inconsiderable, and strangest of all, the expected easy money is not forthcoming. At this stage of his evolution, he discovers that he has spent so much time over his X-ray machine that his general practice is being neglected, and that if he intends to really learn the X-ray work he will have to practically give up a practice he has been years in accumulating. By this time his better judg-

ment reasserts itself and he relegates his X-ray plant to an assistant, and once again resumes his practice. This, gentlemen, is not an exaggerated picture. I know personally of a half dozen such instances in our own community. The point I would like to emphasize is that one cannot take a flyer in X-ray work just for appearance sake. It is serious and difficult work at best, and demands one's entire time and attention, if it is to be conducted along lines that are compatible with the march of medical progress. These remarks are not intended to discourage those who really desire to take up Roentgenology, for no specialty in medicine is developing faster, and there is a positive demand to-day for competent Roentgenologists.

Now as to what constitutes practical X-ray work. Assuming that all mechanical, electrical and technical points are understood, the work comes under two general heads, therapeutics and diagnosis. The former is by far the most complex, if not the most important, and we are all still in the kindergarten class of knowledge upon this subject. Briefly, the present proven field of X-ray therapeutics is (1) the localized dermatoses both benign and malignant, those that do not respond readily to other approved medical or surgical means, and (2) the as yet unproven field of deep therapy. This covers glandular disease, and all pre and post operative attempts upon the viscera. My own views upon the matter of X-ray therapeutics has recently been presented in other communications and will not be foisted upon you at this time.

That which will interest you more perhaps is the diagnostic end, and here again we have two divisions, the visualizing screen, examination and the photographic plate. The fluoroscopic screen has a large field of usefulness, but its constant use demands that it be surrounded with every protective means available. The very fact that we actually render visible to the eye, both physiological and pathological changes in the living subject renders this mode of examination so interesting that one is apt to overstep the time limit of safety during an observation. While the patient might easily escape any serious results, even from one or two prolonged examinations, the repeated saturation of the observer would soon lead to grave symptoms, which are all now too well known to the early workers in this science. Screen examinations if made briefly and under modern pro-tection are quite safe. The regions best studied by the screen are the chest, where early changes may be observed in the lungs, as well as heart and mediastinal conditions. Visualization of the stomach and intestines by means of opaque meals is also of great value, but beyond this it is best to rely on the photographic plate, as for instance bone lesions and fractures. The inspection of fractures by the screen is as a general rule unsatisfactory and bone changes can be studied with so much better satisfaction upon the plate. same holds true for foreign bodies. There have been more X-ray burns follow the attempted re-

<sup>\*</sup>Read before Pacific Coast Roentgen Ray Society, San Francisco, Cal., December 9, 1916.

moval of a needle or bullet by means of the fluoroscopic screen than in any other form of X-ray work. It is so much easier and safer, also far more accurate, to localize the foreign body by means of plates taken in two or more angles. To make a long story short, use the photographic plate whenever possible and use the fluoroscopic screen only in those cases where the plates do not give the desired information.

So we go on with what we had in mind to write about, namely, the discovery of a new class of human beings, a class just like ourselves, with the same capacity to be happy and miserable, but a class that seems to have escaped the beneficent and benevolent eye of humanity up till now. We refer to the indigent aged. There are hospitals and homes, there is a distinct literature, there are conventions and conferences for apparently every other class of people in the world—but for the aged, there is a waiting place for eternity, and an infinitely small niche in the hall of oblivion.

But now there seems to be a new day for the aged. They seem to be human, even as you and I, and entitled to at least a casual survey at the hands of trained and sympathetic students.—The Modern Hospital, July, 1917.

## **Book Reviews**

First Lessons in Spoken French for Doctors and Nurses. By Ernest H. Wilkins, Algernon Coleman and Ethel Preston. Chicago. The University of Chicago Press. 1917. Price 50c.

This seems to be a useful little pocket aid in learning the elements of medical French. A man who carries it about him and studies it in his spare moments should, with a little practice in pronunciation, be able to pick up enough French to make himself understood.

L. E.

The Kingdom of the Mind. How to promote intelligent living and avert mental disaster. By James Mortimer Keniston, M. D. New York. G. P. Putnam & Sons. 1916.

This book takes up in a very readable way the factors that make for a wholesome mental existence. While no new ideas are brought out, the work thoroughly accomplishes its purpose in giving to those interested in mental hygiene a clear, entertaining account free from confusing theories and technical phrases.

H. G. M.

Handbook of Suggestive Therapeutics and Applied Hypnotism. By Henry S. Munro. 4th ed. St. Louis. Mosby Company. 1917.

This book is a complete manual and an instructive exposition of applied psychotherapy. It deals with the latest advances of this much neglected subject and gives practical advice, not only to the specialist for nervous and mental diseases, but to the general practitioner as well. The book fascinates the reader with its many interesting demonstrations and scientific explanations of facts taken from daily medical practice; facts which have hitherto grossly been overlooked by medical men. It is well written from a literary standpoint, and easily intelligible.

A. G.

The Treatment of Emergencies. By Hubley R. Owens, M. D., Surgeon to the Phila. General Hospital; Asst. Surgeon to the Phila. Orthopedic Hospital and Infirmary for Nervous Diseases; Chief Surgeon to the Phila. Police and Fire Bureaus; Asst. Surgeon Medical Reserve

Corps, U. S. Navy. 12mo volume of 350 pages, with 249 illustrations. Philadelphia and London. W. B. Saunders Company. 1917. Cloth \$2.00 net.

A surgical monograph dealing in a simple and cleancut style, with the usual emergencies that are

encountered in a large city.

The text comprises a series of lectures that the author has given to many pupil nurses and the members of the police and fire departments of Philadelphia. Dr. Owen manifests a clear understanding of just how much the average student of first aid is able to master. The procedures recommended are simple and practical. This book will be of extreme value to any physician giving lectures on emergency treatment and the training of medical corps men.

medical corps men.

A great many procedures described are of much value to every doctor, particularly in the chapter on transportation of injured persons. The warning that many simple fractures are compounded by improper handling and that lives are lost by hauling injured persons to a hospital when they could be saved if proper first aid treatment were given at the time of the accident, is fitting. The illustrations are appropriate and very instructive. The definitions are short, not technical and well suited to work on first aid.

E. B.

New Method in Diabetes. By J. H. Kellogg, M. D. Battle Creek. Good Health Publishing Co. 1917. Price \$2.50.

The new method in diabetes by Dr. Kellogg, as stated in the preface, is intended for the use of nurses and patients, but as a matter of fact, it is in many places certainly beyond the mental range of the layman. At the same time it contains so much valuable material put in such excellent form as to be of decided advantage to the general practitioner of medicine. The book does not purport to go into the minutiae of the pathology of diabetes, or to summarize the bases of the recent advances in the theory of treatment, but it does give in very succinct form a good explanation of the grounds for the Allen method and provides in the form of tables and recipes an excellent groundwork for the daily treatment of diabetes. It is probably true that few other classes of cases give more trouble to the physician in the matter of directions than does diabetes. Dr. Kellogg, by the excellence of his charts, and the descriptions of 130 dishes suited to the dietary of diabetics, with the calory values of their constituents, provides an excellent escape from our usual dilemma. Did the book contain nothing else but the recipes it would be well worth a place on our library shelves.

It should be mentioned that Dr. Kellogg lays great stress on the subject of constipation and upon a correct condition of the abdominal musculature. He gives excellent directions for the treatment of diabetic cases along this line.

H. D'A. P.

Diseases of the Genito-Urinary Organs and the Kidneys. By Robert H. Greene, M. D., Professor of Genito-Urinary Surgery at the Fordham University, New York; and Harlow Brooks, M. D., Professor of Clinical Medicine, University and Bellevue Hospital Medical College. Fourth Edition, Thoroughly Revised. Octavo of 666 pages, 301 illustrations. Philadelphia and London. W. B. Saunders Company. 1917. Cloth. \$5.50 net. Half morocco, \$7.00 net.

The new edition of this eminently useful book will be welcomed by the general practitioner as well as by the urological specialist as a valuable addition to their library. In clear and concise language those methods of diagnosis and treatment